Apr 30 2008 8:13AM

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515-281-4862

Mail to: **IECDB** 510 Bast 12th, Suite 1A Des Moines, Iowa 50319

Or Fax: (515)281-4073

IA ETHICS AND AMPAIGIT DEET TRE BD 1008 APR 20



Iowa Ethics and Campaign Disclosure Board

Required by Iowa Code section 68B.35, 68B.3(2), and rules in 351 - Chapter 7.

Personal Financial Disclosure Statement
Name: Jean Heiden Please type or print legibly
Agency or department: 5tate Ban King Board
Position held: Bourd Wen ber
Statewide office sought (non-incumbent candidates only):
This statement is for Calendar Year 20 0 8. Check if this is an amended statement. This statement is required to cover the calendar year praceding the year the report is due.
General instructions: Complete each of Parts A, B, and C below. Attach additional pages if necessary.
* * * * * * * * * * * * * * * * * * * *
Part A. Business, Occupation, or Profession. By position or job title, list each business, occupation, or profession in which you were engaged during the previous calendar year, including the name and nature of each business or employer. If you were not employed by anyone other than the agency and for the position held above check here.
1. United Bank of Town
Part B. Income sources of more than \$1,000. In the categories below list each source from which you received more than \$1000 in gross amual income during the previous calendar year. The amount or value of the holding is not required to be listed. This includes the total amount of any income received jointly with one or more persons exceeding \$1000. Do not report income received solely by your spause or other family members. A source is reportable if the gross income produced was subject to federal or state income tax during the reporting period. If you have nothing to report under Part B sheck here.
1. Securities. List any company in which you owned securities
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Instruments of Financial Institutions. List the institutions from which you received annual gross neome such as certificates of deposit or savings accounts.		
	LINITED ROOF & STORE	
_	United Bank of Your	
_		
	usts. State the nature or type of the trusts.	
	NONE	
_		
Re	al Estate. List the nature of real estate interests including an interest from which income was a from the selling of property. Do not list the location, address, or logal description	
	NONE	
_		
R•	tirement Systems. List the name of the employer/sponsor of any retirement benefit system.	
	11 1 1 T T T R R A-14 AP	
-	UNITED BANK OF DOWA!	
te ii	es to political subdivisions. List any sales of a good or service to a political subdivision of the sale was received.	
Ot	her. List other sources of annual gross income not reported above that were reported for tax	
•		
_	NONE	
_		
	C	
art	C. Certified Signature.	
	I certify that this statement is true and accurate to the best of my knowledge. I understand that	
m s	subject to potential civil and criminal penalties for failing to file an accurate statement or for failing	
filo	this statement by the required due date.	
	Jean Leiden 4-29-08	
	(Signeture of person filing statement) (Date)	